

ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

06/09/2008

Region 2

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER:

NYR000157024

INSTALLATION NAME:

MTA POLICE DEPT

INSTALLATION ADDRESS:

565 COMMERCIAL AVE GARDEN CITY, NY 11530-6444

MAILING ADDRESS:

565 COMMERCIAL AVE GARDEN CITY, NY 11530-6444

EPA Form 8700-12AB (4-80)

USEPA - REGION 2 RCRA Programs Branch 290 Broadway, 22nd Floor New York, NY 10007-1866

ATTN: RCRA NOTIFICATIONS

Tel: (212) 637-4106 Fax: (212) 637-4437

TO: MTA POLICE DEPT

or Current Occupant

ATTN: BRIAN WALSH

565 COMMERCIAL AVE GARDEN CITY, NY, 11530-6444

		#: 2050-0028 Expires 06/3
SEND COMPL FORM TO: The Appropriate S EPA Regional Offi	State or Description and States Environmental Protection Agency	888 MAY - 1 AM 9: 2
1. Reason for Submittal (See instruction page 13.) MARK ALL BO) THAT APPLY	waste, universal waste, or used oil activities)	site identification informatio
2. Site EPA ID Number (page 3. Site Name	··················	
(page 14)	Name: MTA POLICE DEPT.	
4. Site Location Information	Street Address: 565 Commercial AUE	
(page 14)	City, Town, or Village: Garden City	State: NY
5. Site Land Type	County Name: Nessay	Zip Code: 1153
(page 14) 6. North American Industry Classification System (NAICS) Code(s) for the Site (page 14)	Site Land Type:	The second secon
6. North American Industry Classification System (NAICS) Code(s) for the Site (page 14)	A. 1711 131919101 C. L.	
6. North American Industry Classification System (NAICS) Code(s) for the Site (page 14) 7. Site Mailing Address	A. 1711 131919101 C. L.	
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6. North American Industry Classification System (NAICS) Code(s) for the Site (page 14) 7. Site Mailing Address (page 15)	A. 1711 131919101 C. D. L.	unicipal State □ Other !I !I
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6. North American Industry Classification System (NAICS) Code(s) for the Site (page 14) 7. Site Mailing Address (page 15) Site Contact Person (page 15) Operator and Legal Owner	A. 1711 131919101 C. D. L.	Unicipal State Other Unicipal State Other Unicipal State Other Unicipal State Other Other Other Other
6. North American Industry Classification System (NAICS) Code(s) for the Site (page 14) 7. Site Mailing Address (page 15) Site Contact Person	A. 1711 131919101 C. D. LILLI	Unicipal State Other Unicipal State Other Unicipal State Other

address Veryrea.

9. Legal Owner (Continued)	Street or P. O. Box:	93-02 Su	itphin B	slud.		
Address	City, Town, or Village:	City, Town, or Village:				
	State: NY					
	Country: USA			Zip Code: 11435		
 Type of Regulated Waste Activity Mark "Yes" or "No" for all activities; complete any additional boxes as instructed. (See instructions on pages 17 to 20.) 						
A. Hazardous V Complete all	Vaste Activities parts for 1 through 6.					
	or of Hazardous Waste		Y 🗆 N 🏿 2.	Y 🗖 N 🏿 2. Transporter of Hazardous Waste		
If "Yes", choose only one of the following - a, b, or c.		V D N M a	VID NEC 2 Towns Of the Prince of			
a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.) of non-acute hazardous waste; or			Treater, Storer, or Disposer of Hazardous Waste (at your site) Note: A hazardous waste permit is required for thi activity.			
b. so	G: 100 to 1,000 kg/mo (220	- 2,200 lbs./mo.)				
of non-acute hazardous waste; or		Y 🗆 N 🌠 4.	Y D N 4. Recycler of Hazardous Waste (at your site)			
C. CE	SQG: Less than 100 kg/mo (15 / 28 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		
	of non-acute hazardou	s waste	Y 🗆 N 🗖 5.	Exempt Boiler and/or Industrial Furnactif "Yes", mark each that applies.		
In addition, indicate other generator activities.			□ a. Small Quantity On-site Burner Exemption			
Y D N d d. United States Importer of Hazardous Waste		□ b. Smelting, Melting, and Refining				
Y 🗆 N 💆 e. Mix	ed Waste (hazardous and rad	dioactive) Generator	Y 🗆 N 🗆 6.	Underground Injection Control		
B. Universal Waste Activities		C. Used Oil Activities				
D N 2 1. Large Qua	entity Handler of Universal V	Waste (accumulate	Mari	all boxes that apply.		
5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal mark all boxes that apply:		Y 0 N 1. 1	Jsed Oil Transporter			
			If "Yes", mark each that applies.			
		a. Transporter				
	<u>M</u>	anage	1 - 32-7	b. Transfer Facility		
a. Batteries	See Marie Co.		Y D N X 2. L	Ised Oil Processor and/or Re-refiner		
b. Pesticides			lf.	"Yes", mark each that applies.		
c. Thermosta	ats			a. Processor b. Re-refiner		
d. Lamps		۵		Y TOUR OF A TOWN		
e. Other (spe	ecify)	O ,,	Y D N X 3. 0	ff-Specification Used Oil Burner		
f. Other (spe	ecify)		Y D N X 4. U	sed Oil Fuel Marketer		
g. Other (spe	ecify)		If	"Yes", mark each that applies. a. Marketer Who Directs Shipment of		
.		V ₁	, '	Off-Specification Used Oil to Off-Specification Used Oil Burner		
	Facility for Universal Wast rdous waste permit may be re			b. Marketer Who First Claims the Used Oil Meets the Specifications		

(i.e., non-Federal) Hazardou e. List them in the order they s.	s Wastes. Please list the waste covere presented in the regulations.	odes of the State-regulated Use an additional page if
ure that qualified personnel p nanage the system, or those p owledge and belief, true, accu uding the possibility of fine ar	roperly gather and evaluate the info persons directly responsible for gat urate, and complete. I am aware that and imprisonment for knowing violati	ormation submitted. Based thering the information, the at there are significant ons.
ne and Official Title (type o	r print)	Date Signed (mm/dd/yyyy)
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	aw that this document and all ure that qualified personnel paranage the system, or those powledge and belief, true, accurding the possibility of fine are it Application, all operator(s)	aw that this document and all attachments were prepared under ure that qualified personnel properly gather and evaluate the informanage the system, or those persons directly responsible for gat a swledge and belief, true, accurate, and complete. I am aware the ading the possibility of fine and imprisonment for knowing violation it Application, all operator(s) and owner(s) must sign (see 40 CF and Official Title (type or print)